



About To Expire

About To Expire Items List

| Sr. | Item Name | Code # | Batch # | Expiry Date | Location | Cost | Quantity | Loss |
|-----|-----------|--------|---------|-------------|----------|------|----------|-------------|
| | | | | | | | | Total: 0.00 |
| | | | | | | | | |
| | | | | Thank you | | | | |